

CHAPTER IV

DRUG PROBLEMS AND COMMUNITY DEVELOPMENT IN MAEHUGPATTANA

4.1. Drug situation in Maehugpattana before 2001 anti-drug campaign

Drug epidemics, especially methamphetamines, are a serious problem in Thailand, as has been previously discussed Chapter 2. The problem has been rather severe in the northern region because northern villages are closest to production sources in the Golden Triangle and drugs have been trafficked through their communities. The northern geographical features of highlands and jungles, as well as sharing a long border with neighboring, drug-producing countries, has posed many difficulties for law enforcement agencies in controlling drug smuggling and other illegal activities in border areas. Thus, drugs are more readily available and less expensive than in many other regions.

According to a study by Chaimongkol Chanta,¹ in 2001 the number of villages with drug abuse problems in the north was around 9,000; this number had increased to 16,543 by 2002. In Chiangmai province alone, Chaimongkol found that in 2003 some villages in the province had a remarkably high percentage of drug abuse among youths during the period of the past few years: including 50%, 75%, 95% and even 99% of the total number of youths in particular villages.

Compared with other villages in northern rural communities, drug problems in Maehugpattana have been much less severe, but there have been threats to the community due to the wide availability of drugs and the fact that the community is largely exposed to the outside world with a large number of residents working outside the community and most of students going to school outside the community. These workers and students are therefore the main risk groups for Maehugpattana.

¹Chaimongkol Chanta, Community Involvement to Reduce Drug Use in Children and Youth, Tambon Bo Luang, Chiangmai, 2003.

Out of the community's population of 897, more than 60 % (594 persons) are working age; there are 58 persons aged 20-29, 146 aged 30-39, 218 aged 40-49, and 172 aged 50-59.

Table 3. Risk groups

Age group	Population
50-59	172
40-49	218
30-39	146
20-29	58
10-19	74
Total	668 (75%)

Since agriculture is not the main occupation in the community, most people work for others such as in factories and at construction sites which are outside the community. It is possible that they are more exposed to drugs outside the community than those working in the community. A published document outlining community work projects in Maehugpattana² states that prior to 2001 some community members working as labourers outside the community were known to use methamphetamines in order to have more energy for work. An elderly woman interviewed for the study also stated that some employers gave the drugs to their employees to increase production. The report says that some of these labourers later brought the drugs home for personal use and for sale to others in the community. The drug began to spread around the village, especially among teenagers.

Another risk group is teenagers and students aged 10-19 who account to about 8% (74 persons) of the village population. This group is comprised of students who go to the village school, students who go to other schools, and youth who are out of school. One mother indicated that she preferred to send her daughter to the village

² This document is a summary of the process of community development activities regarding drug situations prior to 2001 and the strategies used to tackle the drug situation. It is given to delegations or visitors to the village to provide them with a broad picture of the village's community development work.

school because it was near home and easier to look after her daughter, despite that some parents feel the quality of education at the village school is much lower than that of other schools in the area. Students who go to school in town may adapt a city lifestyle which includes drug-related behaviour. Additionally, these children may later influence their friends in the village since the community is rather close and everyone knows each other and has grown up together in the same community.

This mother also indicated that some parents were worried about their children going to school in town because they had heard news and stories about drug situations in the city and other communities. However, these parents did not know what the drug situation in their children's school was. They only knew that their children left for school in the morning and came home in the evening. There had also been stories of incidents in the community which were due to drug problems among the youth in the community. Residents felt there were problems but they were uncertain of the extent or severity of these problems.

Since drug-related activities often take place in a secretive manner, the number of residents directly involved with drugs is difficult to accurately measure. By the beginning of 2001 just ten residents of Maehugpattana were identified as being involved with drugs. Four of them were drug dealers and six were abusers who were not identified as addicts. Some of these users were labourers taking methamphetamines occasionally for work and others were youths who had experimented with drugs when spending time with their peers.

However, the situation was in fact more serious and had many community residents concerned. The president of the youth group said that drug situation in the community was most accurately known among the young people than among the adults because the youth were much closer to one another. They talked with one another and noticed even subtle changes in the physical appearances of their friends. They could identify which of their friends were involved with drugs or were acting suspiciously.

The Maehugpattana youth group was re-established in 2000 and encouraged all of the youth in the community to participate. Some who joined the group later

discontinued attending activities after some time had passed. The group leader felt that some group members had stopped participating because they were uncomfortable with the regulation that group members are forbidden from any involvement with drugs. These youths also felt shame and guilt if their behaviour became known among their friends. This was only true for young people who joined the group. There were also a large number of youths, mainly out of school youths, who were not interested in joining the group; the behavior for these youths who were not members of the group was less known.

Prior to the anti-drug campaign in 2001 there were a number of youths who created disturbances in the neighbourhood. One woman, who was also a community public health volunteer, lived near the irrigation canal where a road was built parallel to the canal. She indicated that previous village defense volunteers were not active and did not regularly patrol the village at night. Subsequently, young (both males and females) would race their motorcycles; this was noisy and dangerous. These young people stayed up late into the night and met in groups at different spots throughout the village. Some of them would drink heavily and sometimes even get into fights. They were said to be involved with drugs, but no one knew for sure.

Problems among the youth also occur during sports events, which are common in most communities. Some of sports activities are organised by and for community members, while others are organised at the tambon level which involves participation of people from communities throughout the tambon. Some youths take the opportunity at events like this to get together; many of these groups gather to drink or do drugs in the evenings. There were often fights between different groups of young people from different communities during these sports events.

Students who attend the Maehugpattana village school, aged six to 16, come from different villages in Tambon Nongyacng. Some of these students may come from communities where drug use is more common. Some older students may have been involved with drugs in other communities and may influence others in the same school. The village head, the head of community health center, and the leader of youth group all admitted that anti-drug activities or campaigns in the village school were

almost non-existent. There was very little participation from the school in any of the community activities.

Another woman interviewed for the study indicated that both of her children went to school outside the community. Her daughter was first studying at the community school as part of a Thai classical dance group. Members of the performance group were invited to perform at various venues. On occasions when these performances occur during the day, the children are asked to attend their school classes in the evenings. This scheduling has caused problems with the students as some had poorer grades or would spend time out at night with their friends after the evening class. It is believed that some were even involved in sexual and drug-related behaviour. As a result, this woman decided to transfer her daughter to another school.

The village head said that when the school was unable to prevent or solve problems with the students, it should be the parents' responsibility to spend more time and pay attention to their children. However, he found that some parents knew they should be doing more, but were no longer knew how to teach or control their children. An elderly woman indicated during an interview that one of the reasons young people became involved with drugs was because they were spoiled. A number of children are left home with their grandparents who spoiled them. Without discipline from an early age, as they grow older, they become increasingly more difficult to control and supervise.

The drug situation in Maehugpattana before 2001 was rather serious, particularly among the youth. Although some people were not aware of their children's drug-related behaviour, the majority of community members were aware and concerned. While acknowledging the problem and hearing news and stories about drugs in their community and other communities throughout the region, residents also felt fear. However, they were only able to speculate about what was actually going on in their own community with regard to drug-related activities.

4.2 Problem solving process

Because of the serious drug situation in the community, people were concerned. They talked among one another about the problem but did not know how to begin thinking about solutions. Community leaders, especially the director of the community health center and the village head, were also concerned about the well-being of the community as a whole. They were finally able to gather together with community residents to begin expressing their concerns and working together to find solutions to the problems. Hence began the 12-month anti-drug campaign in September 2001, which ran until August 2002.

4.2.1 Light within: Community capacity in transforming problems into unifying force to tackle problems

Solving community problems was not new to Maehugpattana residents. This is because the social development of the community is not typical to that of rural communities in the north because the main use of their land is not for agricultural activities. In other rural communities, people socialize through agriculture. Their relationship was based on the agricultural lifestyle and extended families usually live in the same compound or area. This may have been the case for Maehugpattana residents while still living in Kiengkha village, before moving to their current location. However, upon resettlement, the government separated extended families to live in separate plots of land which they were not allowed to choose. The traditional way of life was therefore largely destroyed. Under the new physical structure of the community where extended families and old neighbours were put apart, they have had to rebuild the bond or strong relationship that they once had.

Not only was social structure, traditional way of life and relationship among people were destroyed but the new land that they were given upon resettling here also post economic problems on the people. Most families in Maehugpattana have low incomes despite support from different groups for occupational development of residents including trainings and financial loans. Agricultural products such as mangoes and longan give provide income just once a year and the price is not usually high. Rice is cultivated only for household consumption. Although most adults are

employed, the pay is low and the work is not regular. In the dry season forest products are scarce making income difficult for those who depend on sales of assorted forest products for income. Many men and women depend on income from manual labor work at construction sites. When there is no business or when the economy is bad these people are rarely employed. The work that some women do for clothes factories is also irregular either because the factories receive small orders from their customers or there is simply no work for the workers who sew the clothes. In addition, competition is high as there are groups of women in other communities who also take the same work from factories.

Although some families were better off than others but the majority of the population was poor. Such shared hardship made people understand each other's circumstances and would be more likely to help each other to lift their living standard. This could be seen from the forming of a number of natural groups many of which were without a particular, guiding principle. This group formation reinforces their ability to generate income. Generally, in a village there are several natural groups of relatives and friends who are interested and skillful in a certain areas. Residents of Maehugpattana had formed several such groups such as a group of women who gather to sew clothes for factories, another group who gather products from the nearby forest, families who make carved wooden toys, and groups of people who have constructions skills and work together at construction sites.

Because of low income and the infertility of their land a number of people in Maehugpattana decided to sell their land, although they are not allowed to do so according to the rule of the Irrigation Department which is responsible for the resettlement of the people. Not only people lost ownership of land but it also caused a lot of conflicts within the community because some people wanted their land back after the land price had increased over the years. Sometimes the conflicts are so serious that threats are made to the involved party's life and property. This kind of conflicts among people has not been completely solved because legal measures cannot be used efficiently since the land is not subject to be sold in the first place.

While some people knew that being poor made their living standard poor so they tried to make more money to buy things that are necessary to their life, others

may not be aware that low income caused their living condition to be poor and they lived in unhealthy household condition and unhealthy neighbourhood. Through the interview, the director of the health center expressed his concern about people's poor living standard which was measured by the reasons for people's sickness when they sought treatment from the health center. For example, some people had rashes on their body for wearing dirty clothes, some had kidney stones because of unclean drinking water, and some had chest problems because of heavy smoking. He also said that a lot of people had little knowledge about healthcare, and when being poor, unemployed people may decide to smoke cigarettes, drink alcohol or even take drugs to ease their stress. Out of desperation, trading drugs may be seen as a way to make money since employment is rather limited in the community. He mentioned that,

The drug problem is complicated. Most of people in the village are poor which affects their health physically and socially. But when people live in a clean house and relationships among family members are good, it makes them happy and healthy. When people are happy and healthy they are less likely to be involved with or depend on drugs.

It was not easy, though, to have a lot of people participate in community development activities when people were more concerned about making a living and some of them had conflicts over land ownership. Besides, serious participation in community work was something rather new to the people; they may not just readily and easily get together to think of solutions of their problems. But increasing concerns among the people disturbed peace and security in the community, which subsequently led to people getting together to find a way to deal with their problems.

Group forming to voice concerns over drugs

Talks of their concerns over youth behaviour and drug problems were first among small groups of families, friends or neighbours. Until the concerns became more worrisome and the talks were more frequent and involved more people, the problems were put as an agenda in community monthly meetings and subsequently meetings were held to discuss this particular issue of drug problems. Such was a problem-orientated process. In one of the first meetings questions that were used to

ask people about situations in the village were direct. One example is: “*What kind of problems will we all have if there are many people in our village selling and taking drugs?*” Hence, this started the 12-month anti-drug campaign, running from September 2001-August 2002.

This approach, people were allowed to brainstorm solutions which they thought may be appropriate and practical in their community. They were able to share their feeling of worries, the problems that they thought was affecting themselves and their family members. With the help of the health officers at the community health center a written material containing a list of criteria for what constituted a good and healthy household was put together. Healthy families, according to the criteria, involve both the physical and social environment of a family. The purpose of this manual was to encourage residents to think and reflect on the realities within their families and their community. It was given to each family for self-evaluation during one workshop. Later the forms were collected and public health volunteers analyzed the information submitted by residents. A summary was put together to show the overall picture of the village health situation and suggestions were made for improvement. For a number of months each house was given scores as part of competition for “outstanding healthy family.” Awards were presented to winners at the end of the campaign in 2002.

Consequently, the fear and problems were clarified; such acknowledgement was transformed into a unifying force where people saw the problems and were willing to do something about it. This also established faith towards their collective fight against the problems. However, it was decided after meetings that there would be a number of activities as part of the anti-drug campaign which would run throughout the following 12 months. Initially, it was a challenge to have a lot of people to get together and plan their activities but their fear of the danger of community problems and the help of community leaders achieved satisfactory level of people’s participation.

Roles of community leaders

The tradition of patron-client practice has had its root in Thailand for centuries where those who are older, in higher position or status are highly respected and automatically expected to be the ones who make decisions and give orders to their subordinate or those in lower status. Such is common in every Thai community and Maehugpattana is no exception. This is perhaps because most of community members are not very well-educated or well-informed about matters that are beyond their daily life; they may not feel confident enough to speak up or give opinion, or that people with higher position or status in the community have always exercised their traditional role of being superior as community leaders, who took responsibilities and made decisions on community matters.

However, community development projects cannot be really successful without people's participation in planning the activities and in decision making. From interview and observations, right from the beginning of the campaign participation among community members has been encouraged by leaders, especially the village head, who often acts as a catalyst to mobilize people's participation.

After participating in more than ten meetings led by the village head, the researcher witnessed a high level of democracy. Central to democracy in Maehugpattana is participation. Several projects were initiated from these meetings. When there is an issue or a problem in the community its causes and solutions are discussed. If there appears to be no immediate solution, the village head asks residents for their thoughts on what should be done. Meetings are rather informal because the society is close, all residents know one another, the leader is friendly, and they are in a safe and friendly environment where everyone feels free and secure in expressing themselves.

The village head is a rather diplomatic man. He listens and takes notes. When there are conflicts or disagreements, voting is used to finalize the decision. Opinions and suggestions often lead to a plan of action in moving toward solutions, which marks the beginning of the development of the project. When it is agreed that a project is needed people discuss its process and other details, especially the division of work.

Such democratic structuring helps to stimulate development and to support improvement in the quality of planning, adaptation and decision-making within the system.

After community problems were clarified and agreements were made that there would be more activities throughout the year it was also agreed that there should be a group of committee who would act as a leading team. But the establishment of the project committee to some extent encountered difficulties. For example, since being a committee member was on voluntary basis people had a choice whether to volunteer or not. Some people may think they were too occupied with their work and had little free time; some had no experience in community work; some were used to the tradition of leaving all the decisions and initiation to the leaders; some may think that they were not experienced or knowledgeable enough to dare to volunteer; and some may still have doubts on the project.

However, there were some people who had been rather active in previous community work in a villages; this included the village public health volunteers, committees of housewives or senior members groups. These people were likely to be more willing to pioneer the projects. Besides, the current situation of serious drug problems and other community problems may make some people willing to be part of the problem solving process. This finally led to the establishment of the anti-drug project committee which comprised of 25 persons.

Anti-drug project

Residents of Maehugpattana are well informed of projects and their development process because they are discussed in detail at meetings where problems were identified and solutions suggested. Before a project requests funding, roles and responsibilities for residents are assigned. Objectives, budget, activities, timeline, evaluation, and the like are set. The village head said that a clear and well constructed proposal is more likely to be supported by the funding body. When projects are well organised people know the direction of the project as well as their roles. In addition, receiving funding means the project is fully supported by the funding organisation, a further justification or guarantee that the project is worth developing.

Each project operates under the direction of a project committee. When there were more projects, the number of people serving as committee members also expanded. In the past, there have been many activities conducted in the community and over time, more and more people have taken on more roles and today many are involved in at least one or two activities.

Among the people who volunteered to be committee members of the anti-drug project was a 36-year old woman from a family which had been rather active in community work, who was interviewed for this study. When asked why she volunteered to be a part of the anti-drug project committee, she indicated that someone needed to do it because she saw that there really were problems in the village and she was willing to be part of the problem solving process. This was her reasoning in getting involved with all the community work she had been a part of. Because of this history of involvement, she had held several positions in various groups such as being a public health volunteer, a village section committee member, a housewives group committee member, and a health development group committee member. She said her contribution made her feel happy and proud. Her father was also a committee member for various groups and was one of the village's Tambol Council representatives for many years. The woman also encouraged her daughters to participate in activities of the youth group. In the future she wished to run as a representative for the Tambol Council.

However, community development activities could not be carried out by project committee alone. It has to involve participation of the whole community, which seems to be difficult because not all of people would be available at the same time. Since participation is voluntary a number of people may chose not to participate because they are not interested or are busy and seeing that participating in community work may mean loss of income. Besides, it is well known in Maehugpattana that some people did not believe that the community campaign against drugs would work and talked badly of the bold attempt of the village head in leading the community that way.

Nevertheless, project committee members, who were more willing to participate in community work than other community members, were encouraged to maintain high level pf participation and good work; although there may be some

community members who still refuse to participate. At a meeting the village head addressed a delegation from the Tambon Council in Pattalung province:

It is impossible to have all people participate at one time. We started with 60% participation. That was a good start. Now the number has increased to almost 100%. The main strategy is letting the mechanism of social pressure take care of everything.

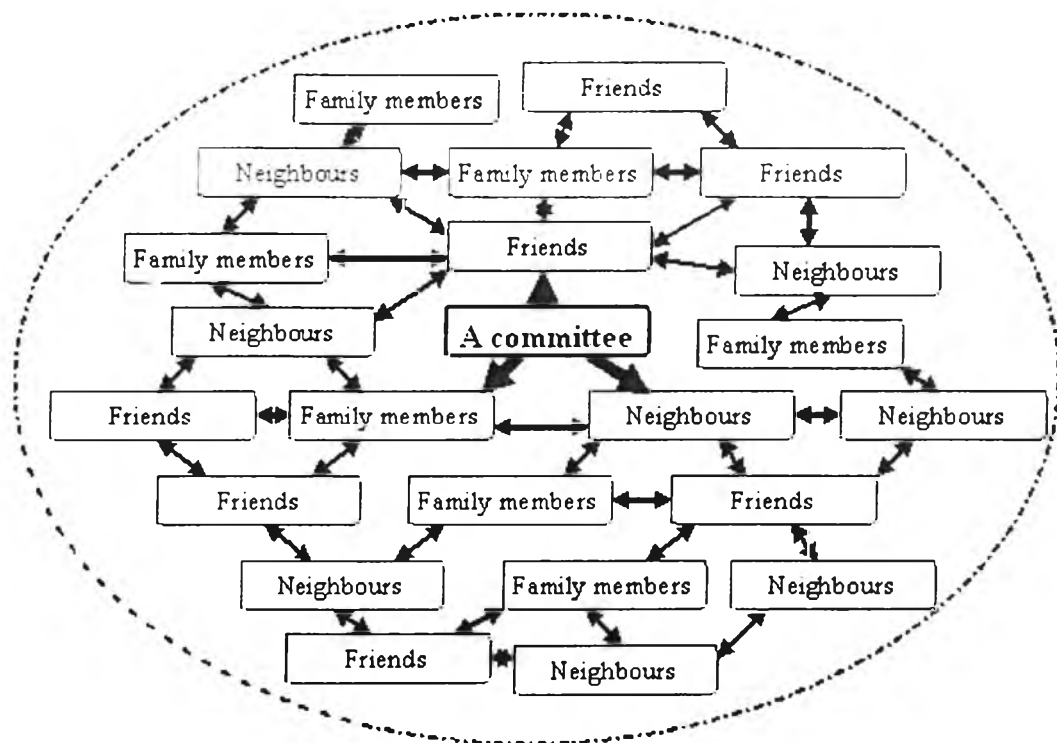
The comment was clarified in a private interview with the village head. He indicated that he did not see it necessary to first achieve participation of the whole village. The first group that he had to work with closely and pay the most attention to was the project committee members. This was because these people volunteered to work for the community. They were more ready and willing to dedicate themselves for the success of the village. He tries to work with them to make sure the objectives of the projects are achieved so that it shows their effort is worthwhile. Later they become role models and good examples for others in the community. They were constantly reminded of their good work and his appreciation for their dedication, in order to uphold their spirit and encourage continued participation.

This process of voluntary work in community development projects also took place in other community organisations or groups where not all the work was left only to the village head or village committee. It served as a decentralization of power to administer or run different programs so that different aspects of life in the community would be improved. Groups or project committees had clear roles and responsibilities. They have a certain authority to run their own meetings, make decisions and run the programs which they are responsible for without the presence of the village head.

Such autonomy encourages participation because they work in a smaller and less formal groups, often with people of the same interests and/or age who are able to relate and work well with one another, as opposed to larger groups with more diverse interests and dimensions of work. When activities take place within the village section, residents simply call on their neighbours to join. When they live close to one another in a close society, it would be difficult to refuse to participate.

Successful groups of village members later tried to encourage others in the community to participate in village activities. As the community is rather close and people tend to meet and talk to one another often, especially those who live in the same neighbourhood or who work together every day in factories or construction sites. Residents who had joined village activities asked their neighbours to join. If they did not join, it would be likely that they would have difficulty finding reasons or excuses not to join. The expansion of community participation was also enhanced among extended families. These people have close relations, they talk and interact; and this consequently serves as family influence when some members of the family participate in the community. Other members of the same family feel that such participation is common in their family and they may not have anything against it and are therefore more willing to take part in activities.

Figure 3: Expansion of participation



There are two families whom the researcher spoke with that serve as good examples of this social pressure dynamic. In the first family of five members, the elderly mother took part in the herbal garden for the seniors group. Her son-in-law was an assistant to the village head and a village defense volunteer. Her daughter was the president of the housewives group. Her granddaughter was a DJ for a community radio program and an MC for community events. Her grandson always participated in the Milk Bar and bicycle activities. The second family was also very active. The elderly father was one of the village's Tamboon Council representatives and a committee member for many groups. His son-in-law had been a public health volunteer before getting too busy with work after which his wife took up the public health volunteer position. The wife was also a committee member for many groups. Her daughter was only 11, but very active in community work. She helped with various activities in the youth group especially at the community radio station. She tried to encourage her friends to join her. The young daughter said:

I try to ask my friends in the neighbourhood to join me in activities. But they are very shy. I tell them not to be shy because it is fun and when you go to the Milk Bar the food is free and you can play games and win prizes too.

From observation and interview, it was revealed that there is much to talk and discuss about in meetings especially when the community constantly carries out more and more activities. When people were allowed to give opinion freely there were often disagreements and people tried to defend their opinion and ideas. A lot of time was taken to settle one matter and in each meeting there are many issues to discuss about. It was noticed that some people at the meeting who did not have anything to say looked bored and some even left before the meeting ended. However, it was sensible that some people found meetings discouraging because some of them were too long running, for example, from 7.00 -10.00 or 11.00pm. People have worked hard all day and may be very tired and need to rest or sleep before up getting early in the morning to go to work again.

As participation is voluntary there is no direct punishment for lack of participation. However, when there are meetings and village activities a family member has to register his or her participation. A record is kept though out the year

and there is an annual report in a form of a big display board placed at the community centre which rates the level of participation of every household on a scale of low, medium and high. Although this strategy is not necessarily intended to be a form of punishment to those who have low participation rate, it does serve as a reminder of each family's position in the community's development. This type of public announcement of participation levels may also serve as a form of social pressure to encourage more participation from those who are at a much lower level than their fellow residents.

Reward and punishment has been used in Maehugpattana to encourage higher participation in the community. Participation in all village activities is voluntary, except village development day which includes things like helping with cleaning up the road, temple, and the like. Families who do not participate are fined. However, there are rewards for people who actively participate in community activities. One of the most common rewards developed by the village head is a certificate which acknowledges residents contributions and praises them for their dedication. Every household has at least one certificate, which is what the family signed in agreeing to participate in the anti-drug campaign in 2001. Some households have more than ten certificates, especially those in which one or more members are very active or where family members hold positions in the community such as on a village committee, a village defense volunteer and a public health volunteer. Certificates are also given to section committees and people or families who meet the criteria of certain campaigns such as to smoking-free families, healthy senior members, and winners of slogan writing contests for the anti-alcohol and anti-cigarette campaign.

Residents proudly display their certificates on the walls of their homes. The researcher visited an elderly man for an interview. He brought down all his certificates from the wall to show the researcher and he said he was so proud of his contribution to the community work. Another elderly woman said that initially she did not want to be a committee member of her section because she already held a number of positions in various groups. But a certificate for being a section committee member was already prepared for her so she decided to accept the position. She said she liked certificates because they reminded her of her contributions to the community.

Throughout 12 months the anti-drug campaign played a role in indirectly and to some extent uniting people and establishing strong bond among them that they worked together in tackling drug problems and developing different aspects of village life. It was the use of social and cultural capital that served as community capacity in dealing with internal problems. When people, who once lived in a bigger compound among extended family members, were separated to live in the plots of land where they could not choose, their relationship may become distant. Community cultural and traditional ceremonies brought them back together.

This reuniting of people took place during the anti-drug campaign. For example, in the beginning the community did not get financial support from outside persons or organisations to run this campaign, but money was needed to pay the cost that may arise. Without money, the project may not have been possible. However, it would not be easy to ask for donation or just collect money directly from families because they were already poor. Therefore, fundraising was raised through a *Phapa* ceremony where people could choose to donate money according to their own will and their belief in merit making, a common and highly respected practice among Buddhists. Not only the ceremony generated fund for the project, but also helped to create a sense of belonging and ownership of the project since the money donated would go to the activities they themselves had developed. It would create pride because they were able to directly contribute to the solution of their problems without relying on outside help, despite people's poor health, low income and conflicts that they may have.

Money was also raised during the ceremony of *Suebchata Moobaan* although the original purpose of the ceremony was to maintain the village's good fate and destiny. This event took place after the campaign had been established for several months. Even after much work had been carried out there may still be people who had doubts about this rather large project of the community. Some people were still uncertain whether the problems would be solved. To raise people's spirit and faith in their work the ceremony was conducted because according to the traditional belief the ceremony was to bless the community and its residents that, moving forward, they would enjoy good health and prosperity because the problems with drugs would soon

be solved and activities for health development would make them happier and healthier.

Not all of the activities had participation from all community members. Some people may be interested, free or willing to participate in only some of them. Without people's participation community activities would not be truly successful. In Maehugpattana, having more activities may mean that more people had a chance to choose to participate in activities they were interested in or ones that they thought would benefit them. Most of the above cultural activities were normally led by monks and elderly people. Such use of the cultural capital of seniority strengthened the community and enabled the participation of various groups of community members. They felt a sense of belonging and pride in their achievement.

An elderly man said that he was too old to run around organizing activities as he once did when he was younger. His grandchildren now gave him and his wife money to use each month so he had a lot of time to help with various ceremonies such as temple event, weddings, funerals, and the like. He said he was proud of his village for having come this far, having seen the hardship people went through when they first moved to the village more than 20 years ago. He said:

We had to help each other because we were new here and those communities that had been here before us were already developed. But look at us now we are far more developed than them.

There are as many as 165 people in Maehugpattana who are 60 and above and most of whom do not work. Although there are some cultural ceremonies in the community they do not take place very often; it leaves the elderly a lot of free time without much to do. Nevertheless, most of adults in the community often work away from home such as in markets, construction sites or factories in other towns and may have to leave home early and not come home until in the evening time. They have little time to spend with or supervise their children who are left to the care of the elderly.

In modern days such as now the gap between the old and the young is rather big; old people may still hold on to traditional way of life but children learn to live in modern society which is much influenced by western culture which may lead them to improper behaviour. These old people may not be able to understand the behaviour of their grandchildren. Parents may try to discipline their children who misbehave but the grandparents may take side with the children which make them spoiled. Some children are also spoiled when parents are too busy with work and may chose to substitute their time at attention with money or material rewards to their children.

In Maehugpattana it is known that many children were spoiled and misbehaved such as getting involved in sex while still at school, drinking alcohol and smoking cigarettes. Some were even involved with drugs. There was one elderly woman, interviewed in this study, who was rather active in community work volunteered to give a talk to community members about traditional way of raising children and how adults should not spoil their children. She indicated that parents and grandparents today often spoil their children and give them too much material support. When children are spoiled in this manner they are not well-behaved or disciplined. According to the woman, parents should retain a certain level of control over children. Without this sufficient control children often become involved in inappropriate behaviours including drug-related behaviour.

This kind of respect for seniors, wisdom and knowledge of the elderly, a kind of social capital, was used to remind people of their traditional way of life, and how parents should raise their children to ensure they grow up with a strong moral foundation and good discipline. It also served as a way to tackle drug problems in the community.

People's participation in development activities alone may not be sufficient to drug problems such as some people developing from drug abusers to become drug dealers and youth hanging out at night involving smoking, drinking and taking drugs. Although only 10 people were identified of selling and taking methamphetamines, a larger number of residents displayed suspicious behaviour and there began strangers or people who did not live in the community who came in the village and were also thought of having suspicious behaviour. It created fear and unhealthy environment in

the community. In the beginning, there were no concrete strategies to deal with the problem, except law enforcement by the police.

Regulations and punishment

It was agreed that there should be a way to manage those residents in the village who are involved with drugs, particularly the less serious cases, so as not to involve the police. It was decided that each family would be asked to write a set of rules they felt would be most appropriate. There was a variety of reactions toward writing up the rules. Those who were prone to be involved with drugs may suggest the rules that were not so harsh, while some people who were more affected by the unhealthy environment, such as those living near the road where young people raced motorcycle nightly, felt that the rule should be harsh. Some even suggested that people who did not follow village rules should be killed.

Later the project committee went through all the suggested rules and chose those most practical for the village considering its political, cultural, and economic nature. The chosen rules were discussed again in a community meeting where community members voted whether they agreed on the selected rules, before they were finalized. The final set of rules is as follows:

A person or family who sells or uses drugs shall be punished according to the following steps:

1. Receive two warnings by the committee;
2. The family's white flag³ will be taken away for three months. If the individual or family is able to rid themselves of the drug problem, the flag will be returned;
3. The offender's name will be publicly announced;
4. The offender will be banned from receiving public or social welfare or benefits for which they would otherwise be entitled;
5. The offender will pay a 5,000 baht fine or perform community service at public activities which benefit others;

³A white flag is a symbol of drug-free family given to each family when the community declared a drug-free community.

6. The offender will be banned from using the village water supply;
7. The offender will be banned from using electricity; and.
8. The offender will be reported to the police to be punished according to the law.

There would definitely be some people who doubt the effectiveness of the rules and whether all community members would follow the rules. To enhance the rules two kinds of obligations were directly imposed upon the people. Firstly, all family members must sign their names indicating they agreed to the rules. A handbook including information on family healthcare, knowledge of drugs, and village rules regarding drugs was given to each household. People were asked to report of any cases of people involved with drugs to the village head or project committee. Secondly, in a ceremony to declare drug-free community, everyone in the community drank blessed water, took an oath, and swore in front of the pictures of the King and the Queen not to be involved with drugs.

It is a well-known fact that members of the royal family, especially the King, have been working vigorously over the years in trying to prevent and solve drug problems throughout the country. Being involved with drugs can therefore by extension be seen as betraying the King and the country—a very serious, moral offence that no one would intentionally do. Additionally, there have always been government campaigns to encourage people to do good as a means of honoring the monarch and the country. Not only did residents see their dedication to the community project as a way of helping their families and fellow villagers, but it was also a small way of helping the King in the country-wide fight against drugs.

In Buddhist Thai society the belief in karma and superstitious power play a great role determining people's behaviour. In Maehugpattana once people signed an agreement that they would follow the rules and swore not to be involved with drugs, they would be likely to fulfill their promise for fear of bad karma or being punished by superstitious power for breaking the promise. Nevertheless, there was a problem with the reinforcement of the village rules where people refused to report anything to the committee in relation to drugs because they fear of getting into trouble.

Adjustments were made in the middle of the campaign. One community member, who was also the village's Tambon Council representative, spoke about the situation after the village rules were set up and people were asked to report situations or individuals suspected of being involved with drugs. For a few months there were no reports at all. This man said that although people knew of those who were involved with drugs, they did not want to get into trouble by reporting them to the village head. Thus, there were subsequent discussions and it was agreed that there should be comment boxes posted at various places around the village for people to be able to confidentially write to the village head and the committee. Only then did there begin to be report of drug situations which required investigation and monitoring.

Preventive process in keeping the community drug-free

Village defense volunteers also patrolled the village every night. They stationed in various spots in community and rode a motorcycle along the roads and so to monitor people at night from 8.00pm to 2.00am. When they see people gathering in groups they would go and talk to the people to see whether these people were doing anything harmful to the community. If they were suspicious of someone involved with drugs they would report to the village head and a meeting is called for committees to discuss the issue and if there is a need for investigation someone would be assigned to be responsible for the investigation and all are asked to keep an eye on the people involved with the situation.

This is similar to the case when there is a report that an individual may be involved with drugs, the village committee set up a meeting and investigated the case. If the individual was found guilty of engaging in drug-related behaviour s/he was asked to speak with the village head and the committee. Individuals were then given their warning and were reminded of the village rules and that they have already signed an agreement not to be involved with drugs.

One informant, a public health volunteer whose husband was a village defense volunteer, believed this particular strategy worked to some extent but it did not guarantee that drugs would never enter the village again. She said:

I don't feel one hundred percent sure that drugs will not return to the community again. But really, the strategy of calling in people involved with drugs to talk with the village head and the committee really worked. It made people scared of having anything to do with drugs because the committee took it seriously. There are village defense volunteers patrolling the village each night. So the young people don't cause trouble at night anymore.

There were a number of people who were called in because of their involvement with drugs but apart from being given warnings people have never been punished according to the rules of the village that offenders to be cut off from their electricity or water supply. A 65-year-old man said that,

No one has ever been arrested by the police. Despite the harsh rules that we set ourselves, no one in the village has ever been cut off from electricity or water supply. People who were given warnings improved themselves.

Such research findings from the interview may be interpreted that drug dealers and abusers were really afraid of the rules that after being warned they stopped the drug-related activities. However, two kinds of interpretations may be offered. Firstly, during the time that this research was conducted the community had already been seen as successful in tackling drug problems. This gives good image of the community. Therefore, people interviewed may withdraw information for fear of displaying bad image of the community. So they said that after being warned people changed their behaviour and have never been involved with drug again. Secondly, the people who were involved with drugs were not really deeply caught in the circle of drug politics so they may be able to withdraw themselves easily; after being warned they may try to change their behaviour.

In other cases, even though rules were agreed upon and people swore not to be involved with drugs the lucrative drug politics may make people break the rules because drug situations often involve influential people, benefits to some group. Financial benefits from drugs may be an incentive to make people to remain in drug business; this is especially that most of Maehugpattana residents are rather poor.

Besides, addictive habit is not easy to get rid of just by swearing not to take drugs again.

At this stage, the reinforcement of village rules was supported by the use of the community's informal administration as a part of their social and cultural capital. Examples of this informal administration include seniority and close relationships among residents which helped to solve drugs problems. This is especially true when individuals are called in to discuss cases or suspected cases of drug involvement. As described in Chapter 3, close relationships exist within the community wherein older residents are referred to as aunts, uncles, fathers, mothers, and the village head is called the "big father" or *Pho Luang*. The bondage among community members is strong and was utilized as a tactic to deal with drug problems. When cases are called and individuals come to discuss their cases with the village head and the committee, the discussion is done rather informally. It is almost as if it were a discussion among family members, where people address one another other as uncle, father, son, and the like. Compromise and the feeling of *krengjai* or being considerate to others, rather than using harsh law enforcement that people must be arrested, may be a better way to encourage people to stop being involved with drugs.

4.2.2 From anti-drug campaign to ongoing community development programs

Good community work must not be only a sole project, but rather the one that can radiate its effects to other community projects and those in other communities. During first year of the anti-drug campaign from September 2001- August 2002 a number of programs were initiated to support the work of the main drug suppression and prevention activities to continue to develop other aspects of the community. Some of the projects were granted further budget for further activities in the following years and many continues until today.

In Maehugpattana, the continuity of community development activities not only develops the life of people in a number of ways but also create people's community awareness on community work. The anti-drug campaign puts meaning to people's participation; it shows and confirms that if one really helps each other and

works together one is able to tackle the problems in certain ways. People's participation and cooperation is not merely people gathering together and talk, but rather it can lead to problem solving in meaningful ways. Thus, people continue to participate in community activities it may mean that they appreciate their contribution because the successful outcome of the previous activities that they saw really benefited them. They knew what their problems were and tried to solve them. Each group of people had their own role to play.

The anti-drug campaign led to the development of many other activities. There have been programs from the health development group to improve people's health condition. Some of the group's activities include an herbal garden project for the elderly, a workshop on menopause, a one-day event to promote healthy northern food, and daily aerobic dance for those who are interested. The director of the health center, the main supervisor for health programs in the community, often reminds people that in order to have good health, other aspects such as income, safety, cleanliness, a peaceful environment, good morals, knowledge of healthcare, and the like need to be developed or improved through various community activities.

Youth group and youth activities

Youth aged between 10 and 30 accounted to 132 persons, may be the most vulnerable group to drugs; they therefore have been taken as the main target group of Maehugpattana community development and activities orientated in the village. Having known that, cultural capital such as rituals and ceremonies have worked well in strengthening the relationship among older people which gives them a strong sense of belonging and therefore they are more willing to participate in community development activities, but for the younger generation rituals and ceremonies are not always sufficient to encourage their participation, instead, they may find them rather boring. Therefore, the use of other forms of support such as training and technology are essential for the youth.

Youth group in the community comprised of students and out-of school students which include those who stopped going to school for various reasons and those who have already graduated but were unemployed. Since employment in the

community is limited, there were a number of young people who were looking for a job. Being unemployed and having too much free time may cause stress to these young people who may be vulnerable to drugs thus make problems to the risk group become more intense.

Subsequently, during the anti-drug campaign, the main activity for youth was cultural development program where a special budget was allocated to buy northern musical instruments for the youth to get together and practice traditional northern music and dance. This was because there were older youth who were looking for a job but had formal training in northern dance and music from their schools and were willing to share this knowledge and skill with others in the youth group.

One of the trainers was a new graduate from a college in Chiangmai who was looking for a job teaching northern dance and music. While in the job search process, he enjoyed doing volunteer work teaching music and dance. He was happy to know that the Tambon Council was considering granting a budget to the community to hire him to conduct a proper music and dance program, as this would mean he would not need to find work in the city but could live with his family and friends in the community while still do the type of work he enjoyed and was proud to do.

Through this program, not only would the youth in the community be spending their time constructively and away from drugs, but it also served to develop a sense of pride in their indigenous traditions. It helped to preserve their culture in such a manner that they were later invited to perform at various events, both in their own community as well as in other communities throughout Chiangmai.

However, the number of young people participating in music and dance activities was rather small and there were still a lot of youth who did not have anything to do in their free time. Though they may no longer be involved with drugs for fear of punishment but having too much free time would lead them be tempted to behave in a way that are not constructive thus continue to cause problems and disturbance in the community. The director of the health center said that after the anti-drug campaign youth activities were now aimed at long-term results which focused on aspects such as moral, ethics, emotion, culture and local wisdom which were all important to youth

development in terms of drug prevention. He then began to talk around with young people for setting appropriate programs that would attract their attention or that they thought would be fun and beneficial to them; it would encourage more participation from them.

The “Milk Bar”, bicycle rally and community radio programs for youth were the ones that were established after completion of the anti-drug campaign in 2002. The “Milk Bar” is a program of the youth group aiming to get as many young people in the community as possible to get together once a month, in the evening between 7.00 and 9.00pm on first Saturday of the month to do fun but useful activities together. The reason for it to be only once a month is because activities needed planning and responsibilities by youth leaders who were high school and college students.

The main activities of the “Milk Bar” are held at the community health center led and facilitated by leader team of the youth group. The number of participants ranges from 30-60 people. Leaders buy fresh milk from a dairy farm in the village and white bread from the market. Members help boil the milk and make the toasts. While people sit on the floor around tables drinking their milk and eating their toast, leaders give talks about health education and drugs issues or issues useful to young people, which usually lasts for about 20 minutes. Later there are games and competition, usually involving questions about the issue that had been discussed earlier. Winners receive prizes.

In the beginning the number of participants in the “Milk Bar” activities was rather high because the program was widely promoted in the community. Some youth took it as an opportunity to go out of the house at night, meet with their friends and eat free food and drink free milk. However, since youth who participated in the activities ranged from 10-year olds to 30-year olds, the activities did not interest all age groups and a number of older youth began to stop going to the “Milk Bar”. However, some of them told their parents that they would go the youth activity for the night but instead used the opportunity to hang out with their friends elsewhere.

Later, another activity for the youth was established. This was an activity under the name translated from Thai as ‘Bicycle riding bringing knowledge to households’.

This one-day bicycle rally activity takes place once in two months on Saturday. The main objectives are to encourage young people to spend time useful and healthy, to assimilate knowledge on health issues to community members and to enhance teamwork and community development work among young people.

Leaders of the youth groups are divided into different groups to organise the rally, such as a group preparing leaflets on health issues, a group preparing the bicycle route around the village, a group preparing prizes for participants and a group working with the village defense volunteers to provide safety on the route, etc. Though the target group of the activities is youths, anyone in the community is welcome to participate. Each time, an average of about 60-70 people participate. On the activity day participants assemble at one place, they are told the objectives and procedure of the activity. Then they are divided into different groups riding a bicycle to different parts of the village to distribute the leaflets. Finally they meet at the community health center and the committee gives prizes to winning groups.

The bicycle rally was to some extent successful in encouraging more young people to participate in more youth activities. Some of them who do not find “Milk Bar” interesting prefer to join the rally. Some of them are those children who once like to hang out at night and race motorcycle causing a lot of noise and danger in the neighbourhood. The reasons for them to be interested could be because it was fun as they like speed and could race with other groups. Nevertheless, those youth who are not interested in community activities particularly ones that involve a lot of public participation, continue to refuse to join in.

In 2003, with the help from the North Net Foundation, an NGO based in Chiangmai, community radio was set up at Maehugpattana community health center. Previously, a number of community youth group members were given training and workshops on health education especially sex education by the North Net Foundation. Some of them also went to trainings on community radio network and visited a number of community radio stations in Chiangmai. After the community radio was set up it was given a name “Stars FM”, taken from the name of the youth group “Stars in the Dream”, and youths who have had the trainings run radio programs on various topics such as sex education and news, and mostly carried out in northern dialect. The

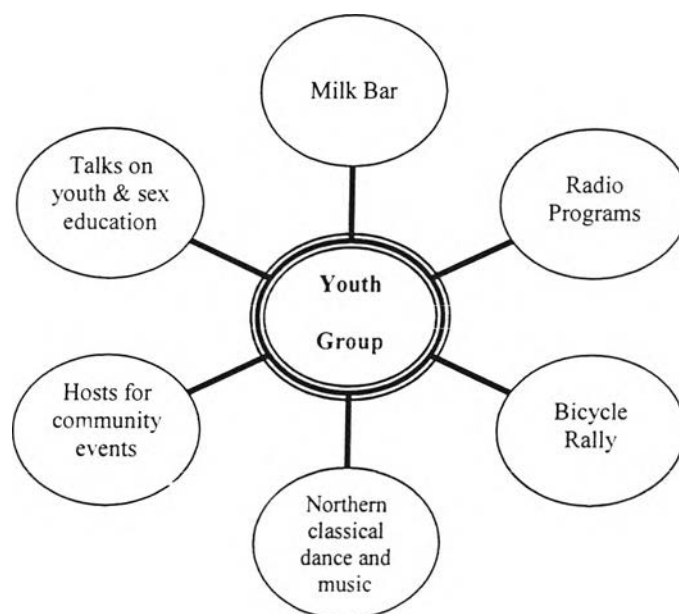
officer from the North Net foundation and the director of community health center provide the youths with a lot of information on health issues.

Most of the radio programs are in the evening and on weekends. When not being too busy, the director of the community health center talks on the radio between 3.00 and 4.00pm on various health issues. After youth members come home from school they take turn running the programs until 9.00pm. On weekend, the programs are from 8.00am to 9.00pm.

There is one 30-year old man who was once referred to by community members as “trouble maker” that he liked to drink a lot of alcohol, smoke cigarettes get into fights with youth from nearby communities. Since the establishment of the community radio station he began to be interested in participation in youth activities because he likes music. He has been running a radio programs since 2003 and could listen and play the music that he liked. Because he was older he was assigned to be in charge of the radio programs and because of having to be a leader, he has changed his behaviour a lot that he had to take a lot of responsibilities and be a role model for younger youth.

Two of the youth group members who were given proper training on how to run radio programs and had helped at the community radio station included an eleven-year old girl and a thirteen-year old boy. After a year of helping older youths with various activities and running radio programs, the boy now had his own program where he organised and ran everything by himself. The girl said that she was helping others with running a program called “Spy Kids” and hoped that one day she would be allowed to have her own program. Though this girl went to school outside the village, she spent an hour each evening along with her friends in the village to practice northern musical instruments, and she now was a group member of the village’s northern music band. She said participating in youth activities was fun and it had improved her self-confidence.

Figure 4: Ongoing activities of youth group



Encouraging participation of uninterested youth

However, despite a number of ongoing activities for the youth, there are still some young people who do not participate at all. Most of school-aged residents of Maehugpattana go to school outside the village and are increasingly engaged in more academic activities so they do not have much time to participate in community activities, although the target group of many of these activities is young people. There have been problems with young people's behaviour such as smoking, drinking and having sexual intercourse at young ages. Some have adopted inappropriate behaviour from the city as a result of Western influence. There is also a concern that these youth may forget their own culture and traditions. Activities are designed to include the participation of these young people in the village. However, some children stay in dormitories or apartments in town and only come home on weekends. Those who come home daily have limited availability because they must attend extra class after school and on weekends.

Community organisations in the village, particularly the "Stars in the Dream" youth group and the health development group, do not want youth programs to be developed without including participation of youth members in the planning process.

Young people have to get together and help to plan and make decisions on the details of the program and especially the roles and responsibility of members in the particular program. Other than during school holidays, it is hard to achieve high participation of youths because they are busy with their studies.

The strategy to tackle this problem has been to develop more activities with the aim that every young resident participate in at least one activity. The president of the youth group said that:

In the beginning the number of youths participating in youth activities was high. But some of them began to disappear, either because they felt guilty that they had once been involved in drug-related activities or because they found the activities boring. So we tried to be more accepting and forgiving of these people. Once they come back, they are encouraged to participate in group's activities so they feel involved, have self-worth, have self-esteem, and have sense of belonging. Now we are trying to develop more activities. Last time we had football competition between the youths in Village 9 and those in Village 11. Youth who had never participated in any youth activity actually joined the competition and they had fun. So we will have sports events more often. Not everyone likes drinking milk, playing games or riding bicycles.

Since some youth how act as leaders in the youth group have been rather active in youth activities. A number of activities will continue to be adjusted and develop to involve wider participation among youth members, with the hope that eventually one youth is engaged in at least one activity.

4.2.3 Expansion of learning process

Not only has the community work of Maehugpattana expanded to include new activities, but has also radiated its effects to involve people in other communities as well. In 2002 after the completion of the anti-drug campaign, the Office of the Narcotics Control Board (ONCB) in Chiangmai chose Maehugpattana to be a model community for tackling drug problems in northern communities. The ONCB works with the two community health centers in Tambol Nongyaeng to assist local health

officers in helping villages in the *tambon* to organise anti-drug activities using the community development work of Maehugpattana as a model. This project is called the “Tambon Nongyaeng Anti-Drug Network” and the village head of Maehugpattana serves as the president of the network. Under supervision of community health officers, each village organises its own activities aimed at addressing its drug problems. In 2004 the network expanded to include five more villages in Tambon Muenglen (also in Sansai district). It is expected that the number of network members will continue to increase every year.

Experience and knowledge collected from lesson-learned activities in sustainable community development of Maehugpattana, especially in combating drug problems, has been passed on to many other communities and organisations around the country. Every year there are large numbers of delegations and visitors to the community to learn about its work. The village head is often invited to give talks about his community in venues around the country. In this process, villagers have opportunities to learn from each other. From observation and participation in village activities where there were visits from delegations, experienced are shared in a form of informal talks where questions were asked and discussions took place, rather than one-way communication or lecture-type presentation of village experience.

Because of its success in tackling its drug problems, in September 2003 Maehugpattana was chosen to be one of the five villages in Thailand to take part in the “Project for the Development of Community Network Processes for Narcotics Abuse,” an activity of the Thai-US Collaboration Office for Amphetamine Research (TUCAR) under the patronage of Princess Ubolrattana. Working with the Mental Health Department and the Chiangmai Drug Treatment and Dependence Center, Maehugpattana hosted nine former drug-addicts to live with nine families in their community for a period of three months. The objective of this home-stay was to allow former addicts the opportunity to live in a supportive, drug-free community before returning home.

Host families were given the necessary training and information to prepare them for the activity. This training included a visit to the Chiangmai Treatment and Dependence Center and to a community in Prajauabkirikhan province which was

another of the villages taking part in the TUCAR project. There have been two groups of former drug-addicts to come and live in Maehugpattana so far. The first group stayed from September 2003 to June 2004. The second group included 15 former addicts and they stayed from November 2004 to February 2005.

Having been exposed to nurse and vitalize the former drug addicts back to life gave Maehugpattana people precious experience. Such experience contributes to learning process among community members, too. Now it is a time to utilize and test the inner strength of how to tackle problems related to drug addicts. By using the activities that are dynamically going on within the village, the community supports those drug addicts to see some light in their capacity and to overcome their problems. By having encountered with youth, the former addicts, who have once been dependent on drugs and seen how hard it is for them to get out of the drug habit. Villagers have learned that they would not want their children or community members to be involved with drugs because it poses a lot of problems to the person, their families and the community. During the TUCAR program people have also learned strategies or means to deal with persons who try to stop taking drugs and return to live their normal lives in the society.

The villagers' dedication and determination in developing their community as well as serving other community was rewarded in a most honorable form. On July 20, 2005 Her Royal Highness Princess Ubonrattana visited Maehugpattana; residents were very proud and pleased to be given the honour of a royal visit.

4.2.4 Towards community development sustainability

In Maehugpattana, all projects are long-term. This includes the anti-drug campaign in 2001 and 2002 which ran for 12 months. Throughout the project, much attention was paid to people's ability to work toward an accomplishable outcome, despite obstacles and problems. Projects community members have decided to do must be considered in terms of people's ability to work, accomplish results, and maintain the work. A project should not be short-term or discontinued without considering the long-term effects and potential of the project.

The village head, who is the core of the activities, believes most of the community activities have been experimental, where techniques and methods were flexible over time in order to reflect people's real ability to work toward a successful outcome. There were times that strategies used for projects did not work well and people learned from their mistakes. For example, the occupational youth development program, smaller program of fish farming which was part of the 2001 campaign, did not work well. It was evaluated and discovered that members of the youth group did not have the sufficient ability to run such a project which involved aspects such as money management, time management, marketing, and the like. Therefore, new activities for youth were organised to better encourage youth participation in planning and construction of complete projects before they submit budget proposals where the director of community health center takes a position in training and supervising youth to write the projects and proposals for their activities.

The continuity and maintenance of Maehugpattana's overall community work is enhanced by sufficient funding. It would be impossible for community members to raise money on their own to fully finance all of their activities. The director of the community center said during an interview that he disagree with some residents of other communities did not feel community work in rural areas worked well because the people are poor and do not have money to run activities. Money and other kinds of capital may be generated within the community but if that is insufficient there is a need to propose for funding from outside persons or organisations. This is because then considering a proposal donors would consider whether the community has capacity or potential to accomplish their objectives there would be more willing to lend support.

After a numerous activities and campaigns, people of Maehugpattana are more confident in their community work and believe that there is a lot to do to improve their community and they are able to contribute to it. Their achievement is concrete and could be measured which makes people from outside confident in their capacity and continue to give support if needed. Presently, all of the projects are financed by various government and non-government organisations including the Sansai District Office, the Nonyaeug Tambon Council, the Thai Health Promotion Foundation, the Office of Narcotics Control Board (ONCB) in Chiangmai, the North Net Foundation,

and the Thai-US Collaboration Office for Amphetamine Research under the Patronage of Princes Ubolratana (TUCAR).

However, people being too confident of their success and in continual financial support may cause negative effects on the community where people have found an easy way to obtain fund and are certain that there will always be such fund for them. Without focusing on the quality and effectiveness of activities and activities, particularly the importance of people's participation, but rather on obtaining fund, may easily lead people to emphasize more on the wrong aspect of community development; the outcome of such practice would definitely lead to failure in the programs in the long run.

4.3 Evaluation of outcome

Maehugpattana's anti-drug campaign and the activities that were a part of this campaign have allowed the village to achieve sustainable community development against drugs. It has been claimed that there is no longer anyone in the community involved with drugs and the behaviour of young people has improved substantially. People living along the nearby road and others around the community have indicated that there are no longer young people hanging out in the evenings making noise and engaging in suspicious behaviour. The village defense volunteers patrol the roads around the village every night, and there are village rules that are strictly enforced with the village head and his committee occasionally stepping in to remind residents of the rules.

Though some residents who have regular contact with people outside the community and are influenced by drugs, the drug situation in the village appears to be completely under control. There have been increasing numbers of on-going activities developed and maintained to keep residents away from drugs, build immunity against drug use, and improve the physical and mental health for all residents. There are always activities for people to do and this creates continuous movement and action in the community. Wherever or whenever drugs may begin to re-enter the community, they are promptly and effectively halted and the problem is addressed. This type of community dynamic has been strengthened by outside government and non-

government organisations that provide financial support and trainings along with other types of support which community members do not hesitate to ask for when they think they need it.

Not only has the work against drugs extensively and intensively spread throughout Maehugpattana, but also all situations in the community are closely monitored by villagers, and others outside the community. This has a radiation effect to nearby communities as well as those which are farther away through the anti-drug network and exchange of knowledge and experience. Drug problems are therefore tackled in a much wider area thereby protecting Maehugpattana from any possible invasion of drugs into the community.

Figure 5. Maehugpattana sustainable community development against drugs

